4624068328 108 Balmoral Dr. L 215

LA No. 5740

Date Issued March 15, 1973 Serial No. 2814

T C No 001-281-02 G

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE SOIL ABSORPTION EFFLUENT DISCHARGE

NAME OF OWNER McInnis (LAST) Jimmie (FIRST) Lee (MIDDLE)

ADDRESS OF OWNER 106 Crestview Drive, Concord, N.C ZIP

LOCATION OF LOT Tuskarora Trail (STREET OR COUNTY ROAD)

SUBDIVISION ~~xikke~~ Lake Norman LOT NO 215 BLOCK NO Section 6

MAP BOOK NO PAGE NO

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface soil absorption effluent discharge based on the percolation test results which indicate a percolation rate of 50 min/in or on site inspection of the said lot and upon the information supplied in the Application for an Installation Construction, Alteration and/or Repair Permit number 5740 This approval is subject to the following terms and conditions

1. That the nitrification field be installed, constructed, altered, and or repaired in the same area where the percolation test was run
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altered and/or repaired and that the system be installed in accordance with same.

This approval may be revoked and the building inspection department requested to revoke any building permits which have been issued to authorize construction on the said lot at any time it is determined that any information contained in the "Application for an Installation Construction Alteration, and or Repair Permit is not correct or is untrue or that the septic tank system is not being installed, constructed altered and or repaired in accordance with a valid Installation Construction Alteration, and or Repair Permit

Environmentalist

Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-4-1-71

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